Ħ		formation to identify	DLL DOC 3 FIR	eu 05/26	0/21 EI	of 2		27.12 Desc	Main		
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			01 2	•				
De	ebtor 1 _	Christopher Lee Wo	eatherford Middle Name	Last Name		-					
	ebtor 2 bouse, if filing)	First Name	Middle Name	Last Name		-					
Ur	nited States B	ankruptcy Court for the:	Northern District of Te	exas							
Ca	ase number										
	known)							Check if this is an	amended filing		
							_		3		
Ωŧ	ficial F	orm 100D									
		orm 122B									
Cr	napte	r 11 Stater	ment of You	ir Curr	rent M	onti	nly Incom	е	04/20		
to th	nis form. In nber (if kno	clude the line numbe wn).	n individual and are fili er to which the addition rent Monthly Income	ial informati							
1.	What is yo	our marital and filing	status? Check one only								
	☐ Not m	arried. Fill out Column	ı A, lines 2-11.								
	☐ Marrie	d and your spouse is	s filing with you. Fill out	both Colum	ns A and B,	lines 2-1	1.				
	☑ Marrie	d and your spouse is	s NOT filing with you. F	ill out Colum	ın A, lines 2-	11.					
	Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.										
							Column A Debtor 1	Column B Debtor 2			
2.			, bonuses, overtime, a	nd commiss	sions (before	e all	<sub>\$</sub> 15,541.68	<sub>\$</sub> 0.00			
	payroll ded	,					\$,	\$			
3.	Alimony a Column B		ments. Do not include p	ayments fron	n a spouse i	f	\$_0.00	\$_0.00			
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.						\$ 2,800.00	\$ <u>2,800.00</u>			
5.	Net incom or farm	ne from operating a b	usiness, profession,	Debtor 1	Debtor 2						
		eipts (before all deduct		\$ <u>0.00</u>	\$ 0.00						
	Ordinary a	nd necessary operatin	g expenses	·——	<b>-</b> \$ 0.00						
	Net month	ly income from a busin	ness, profession, or farm	\$ <u>0.00</u>	\$ <u>0.00</u>	Copy here	\$ <u>0.00</u>	\$_0.00			
6.	Net incom	ne from rental and oth	ner real property	Debtor 1	Debtor 2						
	Gross rece	eipts (before all deduct	cions)	\$ 0.00	\$ 0.00						

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

\$ 0.00

Copy here→

\$ 0.00

\$<u>0.00</u>

## Case 21-30975-sgj11 Doc 3 Filed 05/26/21 Entered 05/26/21 08:27:12 Desc Main Document Page 2 of 2

or 1	Christopher Lee Weatherford		Case number (if kno	own)	
	First Name Middle Name Last Name				
			Column A Debtor 1	Column B Debtor 2	
Inte	rest, dividends, and royalties		\$_0.00	\$ <u>0.00</u>	
Une	mployment compensation		\$	\$	
	not enter the amount if you contend that the amount receive er the Social Security Act. Instead, list it here:				
F	or you\$				
F	or your spouse\$				
ben not Unit disa pay doe	sion or retirement income. Do not include any amount receive fit under the Social Security Act. Also, except as stated in tinclude any compensation, pension, pay, annuity, or allowared States Government in connection with a disability, combibility, or death of a member of the uniformed services. If you paid under chapter 61 of title 10, then include that pay only sinot exceed the amount of retired pay to which you would cottine that provision of title 10 other than chapter 61 of	the next sentence, do not paid by the at-related injury or u received any retired to the extent that it otherwise be entitled	\$ \$	\$ <u>0.00</u>	
Do und und core	ome from all other sources not listed above. Specify the not include any benefits received under the Social Security er the Federal law relating to the national emergency declar er the National Emergencies Act (50 U.S.C. 1601 et seq.) wonavirus disease 2019 (COVID-19); payments received as a set, a crime against humanity, or international or domestic te	Act; payments made red by the President with respect to the a victim of a war			
	pensation, pension, pay, annuity, or allowance paid by the		0.00	0.00	
	ernment in connection with a disability, combat-related inju	•	\$	<b>-</b> • • • • • • • • • • • • • • • • • • •	
	th of a member of the uniformed services. If necessary, list arate page and put the total below.	other sources on a	\$	\$	
			+ \$ 0.00	+ \$ 0.00	
To	tal amounts from separate pages, if any.		١ ৯	. , ,	
			15,541.68	+ 2,800.00	<b>=</b> 18,341.68
Cal	culate your total current monthly income.		\$	\$	\$
Add	l lines 2 through 10 for each column.				Total current
The	n add the total for Column A to the total for Column B.				monthly incom
art 2	: Sign Below				
	- 3				
By s	igning here, under penalty of perjury I declare that the inforr	mation on this stateme	nt and in any attac	hments is true and correct	t.
•			•		
	/s/ Christopher Lee Weatherford	×			
X		Signature of Debtor 2			_
•	ignature of Debtor 1	o .			
	ignature of Debtor 1  05/26/2021  ate	05/26/2021			